



Catherine B. Templeton, Director

*Promoting and protecting the health of the public and the environment*

## **PUBLIC NOTICE for State and Federal Coastal Zone Consistency (CZC)**

**March 11, 2013**

In accordance with the 1977 S. C. Coastal and Tidelands and Wetlands Act (CTWA), as amended, Chapter V of the S. C. Coastal Zone Management Program (CZMP), and the S. C. Administrative Procedures Act (SCAPA), the following projects have been received for determination of consistency with the SC CZMP. Information regarding proposed activities available for public inspection at:

***SCDHEC OCRM  
1362 McMillan Avenue, Suite 400  
Charleston, South Carolina 29405***

Comments must be received by **March 21, 2013** (see attached list of abbreviations as necessary)

### **Berkeley County**

**Project Name:** Short Stay RV Park Pump and Haul

**CZC ID#:** CZC-13-0170

**Site address or general location description:** 205 Short Stay Road, Moncks Corner

**TMS#** 103-00-03-047

**Type of Activity:** The work as proposed consists of installation of two 7,500-gallon underground storage tanks for wastewater from recreational vehicles. The existing septic tanks will be pumped out and abandoned in place.

**Permitting Authority:** FC (DFA)

### **Dorchester County**

**Project Name:** PS #9 Elimination

**CZC ID#:** CZC-13-0133

**Site address or general location description:** From Fred Street to North Hickory Street to North Palmetto Street, Summerville

**TMS#** 13000-00-014

**Type of Activity:** The work as proposed consists of installation of approximately 2,600 linear feet of 12-inch-diameter gravity sewer main. The project proposes to impact 0.017 acre of Federally non-jurisdictional wetland. This plan will excavate 0.017 acre of a 0.903 acre Federally non-jurisdictional wetland.

**Permitting Authority:** SCDHEC-EQC (SW) (WW)

## **STATE CONSISTENCY (CZC) ACTIVITY ABBREVIATIONS**

### **Bureau of Air Quality**

AQ                      Air Quality

### **Bureau of Land and Waste Management**

CFE	Certificates for Exploration (Mining)
HW	Hazardous Waste Facility
IW	Infectious Waste Facility
SWL	Solid Waste Landfill
SWHF	Solid Waste Handling Facility
MR	Mining and Reclamation
OGE	Oil and Gas Exploration and Drilling
RWF	Radioactive Waste Facility
UST	Underground Storage Tank
SWM	Solid Waste Incineration & Solid Waste Pyrolysis Facilities
SWM	Yard Trash and Land-Clearing Debris and Compost

### **Bureau of Water**

AAF	Agriculture Animal Facilities
CNW	Construction in Navigable Waters
GW	Groundwater Use and Withdrawal
IBT	Interbasin Transfer
NPDES	Stormwater National Pollution Discharge
PWS	Public Water System Construction
RW	Recreational Waters Construction
SCP	State Construction Permitting - SW
SS	Shellfish Sanitation
SW	State Stormwater and Land Disturbance
SDR	State Dams and Reservoirs
UGI	Underground Injection Construction
WS	Water Supply
WSA	Water and Sewer Authority
WP	Wells – Individual Residential Wells and Irrigation Wells
WTP	Wastewater Treatment Plant
WQA	Water Quality Analysis - Section 401
WW	Wastewater Discharge - NPDES

### **Office of Ocean and Coastal Resource Management**

CAP	Critical Area Permitting
CZC	Coastal Zone Consistency

### **Office of Regulatory Staff**

MUF                      Major Utility Facilities

## **FEDERAL CONSISTENCY (FC) ACTIVITY ABBREVIATIONS**

DFA	Direct Federal Activity
FPL	Federal Permit or License
FA	Funding Assistance
OCS	Outer Continental Shelf



**NOTICE OF INTENT (NOI)**  
**For Coverage(s) of Primary Permittees**  
**Under South Carolina NPDES General Permit**  
**For Stormwater Discharges From Construction Activities SCR100000**  
(Maintain As Part of On-Site SWPPP)

*C2C-13-0133*

**For Official Use Only**

File Number: 18-13-02-03

Permit Number: SCR10 R621

Submittal Package Complete: \_\_\_\_\_

Submission of this Notice of Intent constitutes notice that the Applicant identified in Section II intends to be authorized as a Primary Permittee in the state of South Carolina under NPDES General Permit SCR1000000. Fees required for review and NPDES coverage of each application type are as listed on page 2 of the Instructions.

**RECEIVED**

FEB 26 2013

DHEC - OCRM  
CHARLESTON OFFICE

Date: 02/20/2013

Project/Site Name: PS #9 Elimination

County: Dorchester

(Modification or Change of Information Only) Prior Approved NPDES Permit or File Number: \_\_\_\_\_

Do you want this project to be considered for the Expedited Review Program (ERP)? ☐ Yes or ☒ No (see instructions)

**I. Notice of Intent (NOI) Application Type(s)**

A. Project (Application/Review) Type(s) (Select **ALL** that apply):

- ☒ New Project (Initial Notification)      Ongoing Project: ☐ Permitted or ☐ Un-Permitted      FEB 25 2013
- ☐ Late Notification      ☐ Low Impact Development (LID) or Project Design Above Regulatory Requirements
- ☐ New Owner/Operator or Company Name Change (see instructions, attach Form A (Transfer of Ownership/Construction & Major Modification))
- ☐ Major Modification (see instructions, attach Form B (Major Modifications))      *Entered as MS4 per Section IB + check, Holdi*
- ☐ MS4 Project Review
- ☒ Ocean and Coastal Resource Management (OCRM) Review
- ☐ Change of Information/Other (Specify): \_\_\_\_\_

B. If Applicable, identify the entity designated as **MS4 Reviewer and MS4 Operator** (i.e., Lexington County, City of Greer, etc.): **MS4 Reviewer** Town of Summerville (Russ Cornette)      **MS4 Operator** Town of Summerville

**II. Primary Permittee Information**

☐ Change of Information

☐ Person or ☒ Company

If a Company, are you a ☐ Lending Institution or ☒ Government Entity?  
Company EIN (if applicable): EIN: \_\_\_\_\_

A. Primary Permittee Name: Summerville CPW

Mailing Address: PO Box 817      City: Summerville      State: SC      Zip: 29484  
Phone: 843-875-8761      Fax: 843-875-8776      Email Address: rckahler@bellsouth.net

B. Contact /ODSA Name (If different from above OR if owner is a company): \_\_\_\_\_

Mailing Address: \_\_\_\_\_      City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_      Fax: \_\_\_\_\_      Email Address: \_\_\_\_\_

C. Property Owner Name (If different from above): Presbyterian Home of SC

Mailing Address: 2817 Ashland Road      City: Columbia      State: SC      Zip: 29210  
Phone: \_\_\_\_\_      Fax: 803-772-5872      Email Address: kligon@preshomesc.org

**III. Comprehensive Stormwater Pollution Prevention Plan (C-SWPPP) Preparer Information** ☐ Change of Information

A. C-SWPPP Preparer Name: R. Christopher Kahler, P.E.

B. Registered Professional ☒ Engineer ☐ Landscape Architect ☐ Tier B Land Surveyor      S. C. Registration #: 15880

C. Company/Firm Name: Summerville CPW      S. C. COA #: \_\_\_\_\_

Mailing Address: PO Box 817      City: Summerville      State: SC      Zip: 29484  
Phone: 843-875-8761      Fax: 843-875-8776      Email Address: rckahler@bellsouth.net

**IV. Project/Site Information**

☐ Change of Information

A. Type of Construction Activity(ies) (Select **ALL** that apply):

- ☐ Commercial      ☐ Industrial      ☐ Institutional      ☐ Mass Grading      ☒ Linear      ☒ Utility/Infrastructure
- ☐ Residential: Single-family      ☐ Residential: Multi-family      ☐ Multi-use (Commercial & Residential)
- ☒ Site Preparation (No New Impervious Area)      ☐ Other (Specify) \_\_\_\_\_

B. Site Address/Location (street address, nearest intersection, etc.) From Fred St to North Hickory St to North Palmetto St

City/Town (If in limits): Summerville      Zip Code: 29483

Latitude: 33° 02' 02" N      Longitude: - 80° 10' 22" W      (Source): ☐ GPS ☒ Web Site: Google Earth

Tax Map Number (s) (List all): 13000-00-014

- C. Is this site located on Indian Land? ☐ Yes ☒ No
- D. **Proposed Start Date:** 04/01/2013 **Proposed Completion Date:** 07/31/2013
- E. **Disturbed Area** (nearest tenth of an acre): 2.3 **Total Area** (acres): 47.4
- F. **Modification Only:** (nearest tenth of an acre): **Disturbed Area:** **Current (Approved) Area:** **Disturbed Area Change (Increase Only):** **Total Disturbed Area (After Change):**
- G. Is this project part of a **Larger Common Plan for Development or Sale (LCP)**? ☐ Yes ☒ No  
**LCP/ Overall Development Name:** Check here if this is the **First Phase.** ☐  
**Previous State Permit/File Number:** **Previous NPDES Coverage Number:** SCR10
- H. Any **Flooding Problems** exist downstream of or adjacent to this site? ☐ Yes ☒ No (If yes, provide detailed description of flooding problems and applicable floodway/flood zone information in the C-SWPPP).
- I. Active **S.C. DHEC Warning Notice, Notice to Comply or Notice of Violation** for this site or LCP? ☐ Yes ☒ No
- J. List Relevant **State and Federal Environmental Permits or Approvals** applied for or obtained for this site (e.g., **RCRA, USACOE, Nationwide**, etc.). If **None**, list **None**.  
 SCDHEC Wastewater Construction Permit
- K. **Any Waiver(s)/Variances/Exceptions Requested for this Project?** (If yes, identify below and include **Waiver Request and Justifications** in the C-SWPPP for each proposed request).

1. Small Construction Activity Waiver(s) From NPDES permitting (**Section 1.4 & Appendix B**)? ☐ Yes ☒ No  
 If yes, identify requested waiver: ☐ Rainfall Erosivity Waiver ☐ TMDL Waiver ☐ Equivalent Analysis Waiver
2. Detention Waiver (**72-302(B)**)? ☐ Yes ☒ No
3. Other (Specify):

**V. Waterbody Information** (Attach additional sheet(s) as needed) ☐ **Change of Information**

- A. **Receiving Waterbody(s) (RWB) Information** (List the nearest and next nearest receiving waterbodies to which the sites stormwater discharges will drain. If stormwater discharges drain to multiple waterbodies, list all such waterbodies).

1. Name of Receiving Waterbodies (RWB)	2. Distance to RWB (feet)	3. Classification of RWB
a. <b>Nearest:</b> Sawmill Branch Canal/Dorchester Creek	8500	FW
b. <b>Next Nearest:</b> Ashley River	46000	SA
c. <b>Coastal Zone ONLY: Coastal Receiving Water (CRW):</b>		Not Applicable
d. <b>Other Waterbodies:</b>		

**B. Waters of the U.S. / State Information** (Attach additional sheet(s) as needed)

Waters of the U.S./ State	1. On the site?	2. Delineated/ Identified?	3. Impacts?	4. Amount of impacts
a. <b>Jurisdictional wetlands</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	___ Ac
b. <b>Non-jurisdictional wetlands</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	0.017 Ac (isolated)
c. <b>Other Water(s):</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	___ Ac ___ Feet
d. <b>Coastal Zone ONLY: Direct Critical Area</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	___ Ac ___ Feet

5. If yes for impacts in B.3, describe each impact and activity, and list all permits (e.g., USACOE Nationwide Permit, DHEC General Permit) and certifications that have been applied for or obtained for each impact:  
 Sewer main construction to cross edge of isolated wetland. Disturbed area to be reset to existing conditions.

- C. **S.C. Navigable Waters (SCNW) Information (Section 2.6.5)** The Department will address any issues related to State Navigable Waters' Program under SC Regulation 19-450 during the review of the C-SWPPP for activities that will **NOT** require a 404 permit or a 401 certification. (Attach additional sheet(s) as needed).

1. Are **S. C. Navigable Waters (SCNW)** on the site: ☐ Yes ☒ No  
 a. If **no**, do not complete this question. Proceed to Section D (Impaired Waterbodies).  
 b. If **yes**, provide the name of S.C. Navigable Waters (SCNW) on the site: **Stormwater, Construction & Agriculture Permitting Division**

2. If **yes** for C.1, will construction activities cross over or occur in, under, or thru the SCNW? ☐ Yes ☒ No  
 If yes, describe SCNW activities (e.g., road crossing, sub-aqueous utility line, temporary or permanent structures, etc.) and proceed to Section C.3:

3. Identify permits providing coverage of SCNW activities proposed for your site. If **NONE**, list none.

Permits/Certifications	Permit or Certification No.	Corresponding Covered SCNW Activity(ies)
a. <b>DHEC General/ Other DHEC Permit</b>		
b. <b>USACOE 404 Permit or 401 Certification</b>		
c. <b>SCNW Permit</b> If applied for or issued, identify <b>Date applied for or issued:</b>		<input type="checkbox"/> <b>All Activities</b> or <input type="checkbox"/> <b>Some Activities (Describe):</b>

d. If a **SCNW Permit** has **NOT** been applied for provide an additional plan sheet that shows plan and profile views (drawn to scale) of the SCNW and associated activities. Include a description of all proposed activities on this plan.

**D. Impaired Waterbodies Information** (Attach additional sheet(s) as needed)

1. 303(d) Listed Impaired Waterbodies					
a. Name of <b>Nearest DHEC Water Quality Monitoring Stations (WQMS)(s)</b> that receives stormwater from your construction site and/or thru an MS4 and the <b>Name of the Corresponding Waterbody?</b>		b. Is this <b>WQMS(s)</b> listed on the <b>most current 303(d) list</b> ? If <b>No</b> , proceed to <b>Section 2</b> of this table. If <b>Yes</b> , complete items <b>c thru f</b> .	c. List the pollutant(s) identified as <b>"CAUSES"</b> of the impairment	d. Will any pollutants causing the impairment be present in your site's construction stormwater discharges?	e. If <b>yes</b> for <b>d</b> , list the <b>"USE SUPPORT"</b> impairment(s) affected by the pollutant(s) identified in <b>c</b> .
Nearest DHEC WQMS(s)	Corresponding Waterbody				
CSTL-013	Dorchester Creek	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DO	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
f. If <b>yes</b> for <b>d</b> above, will use of the <b>BMPs</b> proposed for your project ensure the site's discharges will <b>NOT</b> contribute to or cause further <b>WQS</b> violations for the impairment(s) listed in <b>c</b> ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (NOTE: If <b>no</b> for <b>f</b> , this site is <b>NOT</b> eligible for coverage under the <b>CGP</b> ). See Instructions.					
2. TMDL Impaired Waterbodies					
a. Name of <b>Nearest DHEC Water Quality Monitoring Stations (WQMS)(s)</b> that receives stormwater from your construction site and/or thru an MS4?		b. Has a <b>TMDL(s)</b> been developed for this <b>WQMS(s)</b> ? If <b>No</b> , identify as such below and proceed to <b>Section VI</b> . If <b>Yes</b> , complete items <b>c thru f</b> of this table.	c. If <b>yes</b> for <b>b</b> , what pollutants are listed as <b>"CAUSES"</b> or causing the impairment?	d. If <b>yes</b> for <b>b</b> , has the standard been <b>"ATTAINED"</b> or <b>"Fully Supported"</b> for the impairment(s)?	e. If <b>no</b> for <b>d</b> ( <b>Not Attained</b> ), will any pollutants causing the impairment be present in your site's construction stormwater discharges?
CSTL-013		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. If <b>yes</b> for <b>e</b> above, are your discharges consistent with the assumptions and requirements of the <b>TMDL(s)</b> ? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (NOTE: If <b>no</b> for <b>f</b> , this site is <b>NOT</b> eligible for coverage under the <b>CGP</b> ). See Instructions.					

**VI. Signatures and Certifications** **DO NOT SIGN IN BLACK INK!** Read the **Certifications** below (in entirety). Provide date, printed name, and signatures below. If you are a **New Owner/Operator**, as **Primary Permittee** you must also sign and date the applicable **Comprehensive SWPPP Acceptance & Compliance Agreement** below.

**C-SWPPP PREPARER:** "One copy of the C-SWPPP, all specifications and supporting calculations, forms, and reports are herewith submitted and made a part of this application. I have placed my signature and seal on the design documents submitted signifying that I accept responsibility for the design of the system. Further, I certify to the best of my knowledge and belief that the design is consistent with the requirements of Title 48, Chapter 14 of the Code of Laws of SC, 1976 as amended, pursuant to Regulation 72-300 et seq. (if applicable), and in accordance with the terms and conditions of SCR100000." (This should be the person identified in **Section III**).

R. Christopher Kahler

15880

**Printed Name of C-SWPPP Preparer**

**Signature of C-SWPPP Preparer**

**S. C. Registration #**

**PRIMARY PERMITTEE:** "I or I (on behalf of my company and its contractors and agents), as the case may be, certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I understand that DHEC enforcement actions may be taken for the terms and conditions of the C-SWPPP are not met and I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

"I or I (on behalf of my company and its contractors and agents), as the case may be, also hereby certify that all land-disturbing construction and associated activity pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans and SCR100000. I also certify that a responsible person will be assigned to the project for day-to-day control. I hereby grant authorization to the to S. C. Department of Health and Environmental Control (DHEC) and/or the local implementing agency the right of access to the site at all times for the purpose of on site inspections during the course of construction and to perform maintenance inspections following the completion of the land-disturbing activity." (See **Section 122.22 of S.C. Reg. 61-9 for signatory authority information.**) Having understood the above information, I am signing this certification as **Primary Permittee** to the aforementioned **NPDES** general permit."

Charles L. Cuzzell, III

Manager

**Printed Name of Primary Permittee**

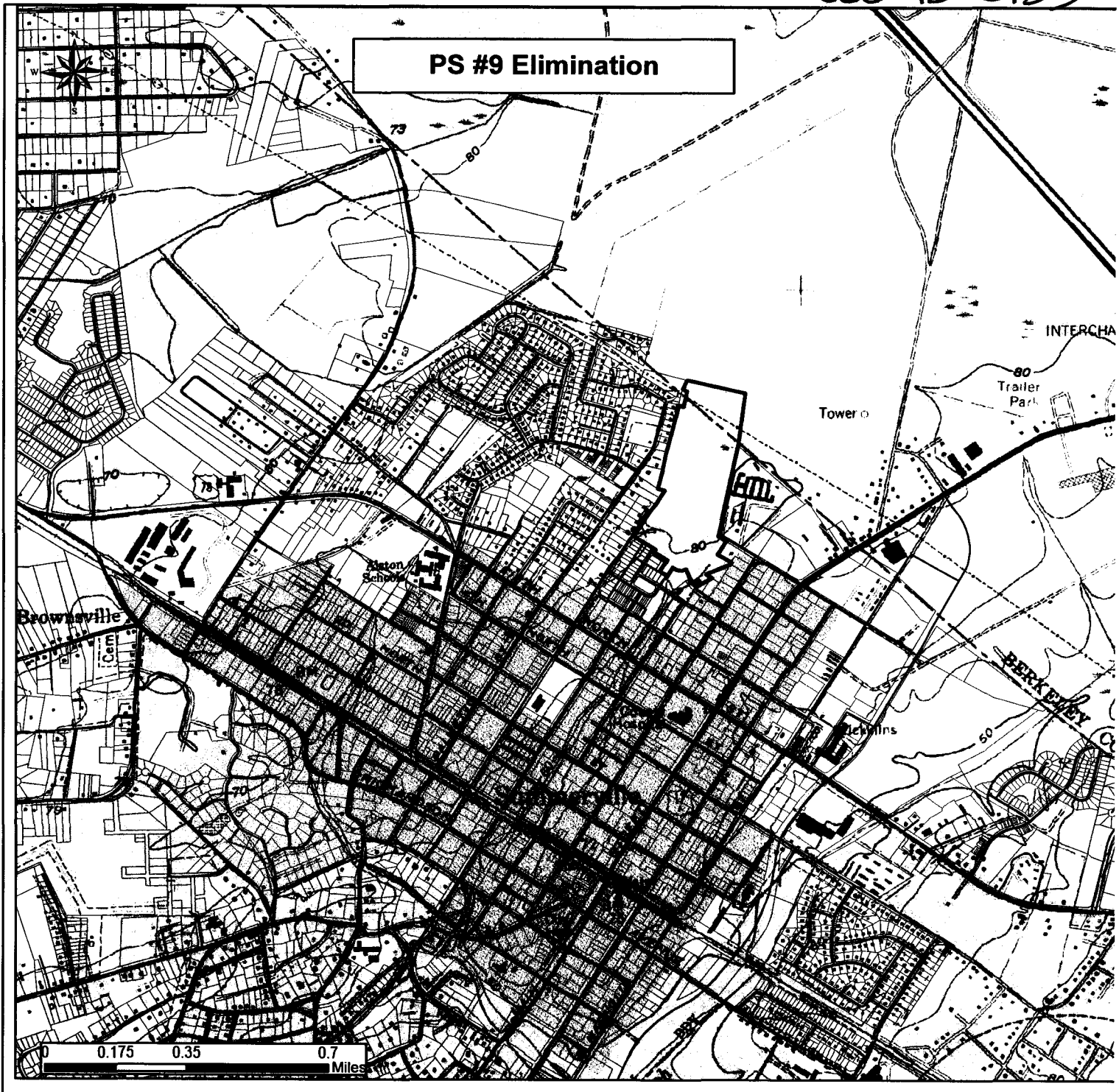
**Title/Position**

*Charles L. Cuzzell, III*  
**Signature of Primary Permittee**

02/20/2013

**Date Signed**

C2C-13-0133



Summerville CPW  
 #9 PS elimination  
 CZC-13-0133

REC-100

FEB 04 2013

Stormwater, Conservation &  
 Agriculture Planning Division

125' S C E & G R/W

S 58°27'29" E 433.04'

DORCHE.

S 58°03'44" E 252.19' (TIE)

N 12°52'22" E 208.60'  
 EXISTING R/W  
 (SEE REF. NO. 4)

IPF 1.5" OPEN

COMMISSIONERS OF  
 PUBLIC WORKS  
 TOWN OF SUMMERVILLE  
 TMS #130-11-09 PAGE 350  
 TMS #130-11-09 PAGE 2700  
 TMS #130-11-09 PAGE 164

LOT 40 GORDON, JR. &  
 LEONARD C. GORDON  
 PATRICIA M. GORDON  
 TMS #130-11-09 PAGE 164  
 TMS #130-11-09 PAGE 2559  
 TMS #130-11-09 PAGE 164

DEED BOOK 2700  
 LOT 39 BRUNNER  
 ROSELINE 11-09-007 004  
 TMS #130-11-09 PAGE 0437  
 TMS #130-11-09 PAGE 0437  
 DEED BOOK 2700

LOT 38 MYERS &  
 HERBERT A. MYERS  
 GERTRUDE 11-09-006 218  
 TMS #130-11-09 PAGE 1817  
 TMS #130-11-09 PAGE 1817

